

For Office Use Only 學會專用

Date: _____

Amount: _____

Handle By: _____

Counter Remark: _____

Enrolment ID.: _____

Individual ID: _____

MPF INTERMEDIARIES EXAMINATION ENROLMENT FORM
強積金中介人考試報名表格

1. Commencing 1 April 2018, all offline enrolment will be charged an administration fee of HK\$100 per application form. The administration fee is waived by submitting enrolment online via [HKSI Institute Online Portal](https://login.hksi.org) (<https://login.hksi.org>).
- 自2018年4月1日起，學會會就每份非網上報名之申請收取行政費用港幣100元。透過學會電子服務網站(<https://login.hksi.org>)遞交報名申請，行政費用將獲豁免。
2. Please read the MPF Intermediaries Examination (MPF) Examination Handbook and the "Notes on Personal Information Collection" carefully before completing this form. The Examination Handbook is downloadable from the [HKSI Institute website](http://www.hksi.org) (www.hksi.org).
- 在填寫此表格前，請先閱讀強積金中介人考試考試手冊及個人資料收集說明。考試手冊可於學會網頁(www.hksi.org)下載。
3. Please complete legibly all parts in BLOCK LETTERS and in BLACK or BLUE INK and put a "✓" in the appropriate "□".
- 請用正楷及黑色或藍色原子筆清楚填寫表格及在適當 "□" 內填上 "✓" 號。

PART 1: Personal Particulars 第一部份：個人資料

Part 1A 第一(甲)部份 (COMPULSORY 必須填寫)

(As stated on your HK Identity Card / Passport 必須與香港身份證/護照上相同)

Surname in English 姓氏 (英文)		First Name in English 名字 (英文)	
Surname in Chinese 姓氏 (中文)		First Name in Chinese 名字 (中文)	
HK Identity Card/Passport Number 香港身份證/護照號碼 You are required to present the original copy of the identification document(s) specified above during the examination 閣下於考試時須出示上述所填寫之身份證明文件正本			
Date of Birth 出生日期	DD日	MM月	YY年
Gender 性別		<input type="checkbox"/> Male 男 <input type="checkbox"/> Female 女	
Title 稱謂	<input type="checkbox"/> Mr 先生 <input type="checkbox"/> Mrs 女士 <input type="checkbox"/> Ms 女士 <input type="checkbox"/> Miss 小姐 <input type="checkbox"/> Dr 博士		
Mobile Phone Number 流動電話號碼			
Email Address 電郵地址		Please provide your PERSONAL email address for receiving your password of HKSI Institute Online Portal and important communications from the HKSI Institute. 請提供閣下之個人電郵地址，以收取學會電子服務網站的密碼及學會重要訊息。	
Name of Company 工作機構名稱		Position Held 職位名稱	

PART 2: Other Information (For statistical analysis and promotion) 第二部份：其他資料 (以供統計分析及推廣之用)

- i) **Number of Attempts of Mandatory Provident Fund Schemes Examination / MPF Intermediaries Examination**
強制性公積金計劃考試 / 強積金中介人考試次數：
- First 第一次 Second 第二次 Third 第三次 More than 3 times 第三次以上
- ii) **Education 教育程度：**
- F.5 or below 中五或以下 F.6 or F.7 中六或中七 Post-secondary or University 大專或大學
- Post-graduate 大學以上
- iii) **Working Field 從事行業：**
- Insurance 保險 Banking 銀行 Investment 投資
- Accounting 會計 Others 其他(Please specify 請註明_____)
- iv) **No. of years of insurance intermediary experience (if applicable) 保險中介人工作經驗 (如適用)**
-
- Years年 Months月
- e.g. if you have worked for 3 years and 4 months in the relevant field, please complete :
如有關工作經驗為三年另四個月請填上： 03 04

PART 3: Examination Information 第三部份：考試資料

I would like to enrol for the following examination 本人欲報考下列考試：

Choice of Examination 考試選擇	Examination Date and Time 考試日期及時間	Examination Fee 考試費	Administration Fee 行政費用
1 st choice 第一選擇		HK\$280	HK\$100 per application form 每張申請表 Commencing 1 April 2018, the HKSI Institute will charges an administration fee of HK\$100 per application form. 自2018年4月1日起，每張申請表收取行政費用港幣 100元。
2 nd choice 第二選擇			
3 rd choice 第三選擇		Total Fee (HK\$) 總費用 (HK\$)	

PART 4: Payment 第四部份：付款方式 EPS 易辦事 American Express Card 美國運通信用卡

□ □ □ □	-	□ □ □ □ □ □	-	□ □ □ □ □ □
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Expiry Date有效期至

 VISA/Master Card VISA/萬事達卡

□ □ □ □	-	□ □ □ □ □ □	-	□ □ □ □ □ □	-	□ □ □ □ □ □
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mm月 yy年

Please charge payment to credit card. 從信用卡繳付以上款項For Office Use Only 學會專用
Approval Code

Cardholder's Name 持卡人姓名：_____ Cardholder Signature 持卡人簽署：_____

(Card holder must be the applicant 持卡人必須為報考人士) (The signature must match with the one on your credit card 簽名必須與信用卡上相同)

PART 5: Application's Declaration 第五部份：申請人聲明

I confirm, acknowledge, accept and understand that:

- 1) if the details I have submitted in this form are inaccurate or incomplete, my enrolment may not be accepted by the Hong Kong Securities and Investment Institute (HKSI Institute) even though payment of the examination fee(s) has been made;
- 2) once I have submitted the MPF Intermediaries Examination enrolment form to the HKSI Institute, I am not allowed to re-schedule and/or cancel my examination. All the fees paid are non-transferable and non-refundable;
- 3) the "Notes on Personal Information Collection" and the MPF Intermediaries Examination - Examination Handbook, including the Regulations of the MPF Intermediaries Examination.

I hereby apply to enrol in the MPF Intermediaries Examination and undertake that I shall observe and abide by the rules and regulations of the MPF Intermediaries Examination.

本人確實、承認並同意接納及清楚明白：

- 1) 倘若本人在此表格上所填報的資料不正確或不完整，本人在繳妥考試費後仍有可能被香港證券及投資學會(學會)拒絕本人的報考申請；
- 2) 本人一旦遞交強積金中介人考試報名表格予學會後，本人不得要求更改考試日期及時間和/或取消考試。已付之費用概不得轉讓及退還；
- 3) 個人資料收集說明及強積金中介人考試-考試手冊，包括強積金中介人考試考試規則。

本人現申請強積金中介人考試，並完全同意及遵守強積金中介人考試的規則。

 I do not wish to receive marketing materials from the HKSI Institute. 本人不希望收到任何學會的推廣資料。

Signature of Applicant 申請人簽署：_____ Date 日期：_____

強制性公積金計劃考試 / 強積金中介人考試 個人資料收集說明

《個人資料（私隱）條例》已於**1996年12月20日**實施，以下內容闡釋考生向主考機構（職業訓練局或香港證券及投資學會）提供個人資料時的權利和責任，以及主考機構在「強制性公積金計劃考試 / 強積金中介人考試」或有關事宜上，如何運用及處理個人資料。考生簽署下方的同意書前，必須詳閱本說明。

1. 主考機構可將「強制性公積金計劃考試 / 強積金中介人考試」中取得及格成績考生的個人資料，移交或傳送至強制性公積金計劃管理局、保險業監理處、證券及期貨事務監察委員會、香港金融管理局、保險代理登記委員會、香港保險顧問聯會及香港專業保險經紀協會。該等機構從移交或傳送途徑取得的考生個人資料，會用於監察事宜或用作協助本身履行有關職責。
2. 根據《個人資料（私隱）條例》，考生有權查閱及更正其提供的個人資料，惟須符合條例所定的方法和限制。查詢可致函或致電主考機構，地址及電話號碼如下：

職業訓練局高峰進修學院考試中心

香港灣仔活道27號

職業訓練局大樓M層

電話：2919 1467

2919 1468

2919 1478

香港證券及投資學會

香港干諾道中111號永安中心

5樓506-512室

電話：(852) 3120 6100

本人謹此聲明，本人向主考機構提供個人資料前，已閱悉及明白本說明的內容。本人自願同意，強制性公積金計劃管理局、保險業監理處、證券及期貨事務監察委員會、香港金融管理局、保險代理登記委員會、香港保險顧問聯會及香港專業保險經紀協會在履行本說明所述職責或其他直接有關的職責時，可使用本人現時或以往提供的一切資料（包括香港身份證及護照號碼）。

姓名（請以正楷填寫）

簽署

日期

NOTES ON PERSONAL INFORMATION COLLECTION
in Connection with the
Mandatory Provident Fund Schemes Examination/MPF Intermediaries Examination

With the coming into force of Personal Data (Privacy) Ordinance on 20 December 1996, these Notes are prepared to assist you in understanding your rights and obligations in relation to the supply of personal data by you to the Vocational Training Council or Hong Kong Securities and Investment Institute, whichever holds the examination you intend to sit for and the manner in which the examination body concerned may use or deal with such data in connection with the Mandatory Provident Fund Schemes Examination/MPF Intermediaries Examination and other matters. You are strongly advised to read these Notes carefully before you sign the Consent at the foot thereof.

1. The examination bodies may transfer or transmit the personal data of those candidates who have passed the Mandatory Provident Fund Schemes Examination/MPF Intermediaries Examination to Mandatory Provident Fund Schemes Authority ("MPFA"), Insurance Authority ("IA"), Securities and Futures Commission ("SFC"), Hong Kong Monetary Authority ("HKMA"), Insurance Agents Registration Board ("IARB"), The Hong Kong Confederation of Insurance Brokers ("CIB") and Professional Insurance Brokers Association ("PIBA"). The personal data so transferred or transmitted may be used by these bodies for monitoring purpose and the purposes of assisting them to perform and discharge their functions.
2. You are entitled under the Personal Data (Privacy) Ordinance to request access to or to request the correction of any data supplied by you, in the manner and subject to the limitations prescribed therein. All enquiries should be directed to the examination bodies concerned at addresses and telephone numbers below:

PEAK Examination Centre
Vocational Training Council
M/F, Vocational Training Council Tower
27 Wood Road
Wanchai
Hong Kong
Tel : 2919 1467, 2919 1468, 2919 1478

Hong Kong Securities and Investment
Institute
Room 506-512, 5/F, Wing On Centre
111 Connaught Road Central
Hong Kong
Tel : (852) 3120 6100

I, the undersigned, hereby confirm and acknowledge that I have read and understood the above Notes before furnishing my personal data to the examination body concerned. I voluntarily consent to the use of such data (including the HK Identity Card no. or passport no.) and all personal data I previously supplied, if any, by the MPFA, IA, SFC, HKMA, IARB, CIB and PIBA for the purposes of discharging all or any of their functions described in the said Notes and for any other purposes directly related to those purposes.

Name in Block Letters

Signature

Date